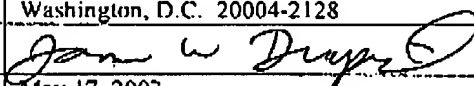
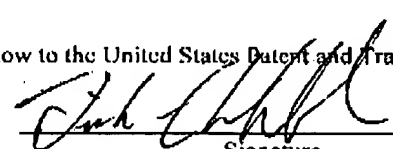


TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/915,114			
		Filing Date	July 25, 2001			
		First Named Inventor	Thomas Lemmons			
		Group Art Unit	2623			
		Examiner Name	Kieu Oanh T. Bui			
Total Number of Pages in This Submission	14	Attorney Docket Number	INTE-12US01 043978-021000			
ENCLOSURES (check all that apply)						
<table border="0"> <tr> <td style="vertical-align: top;"> <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment Under 1.111 <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 </td> <td style="vertical-align: top;"> <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Accept an Unintentionally Delayed Claims for Priority Under 37 C.F.R. §1.78(a)(3) <input type="checkbox"/> Power of Attorney, Revocation/Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) </td> <td style="vertical-align: top;"> <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below). </td> </tr> </table>				<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment Under 1.111 <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Accept an Unintentionally Delayed Claims for Priority Under 37 C.F.R. §1.78(a)(3) <input type="checkbox"/> Power of Attorney, Revocation/Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below).
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Remarks		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 30-3557 for the above identified docket number.				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
Firm or Individual name	James W. Drapinski Reg. No. 46,242 Nixon Peabody LLP 401 9th Street, N.W. Suite 900 Washington, D.C. 20004-2128					
Signature						
Date	May 17, 2007					
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:)
Thomas Lemmons) Group Art Unit: 2623
Serial No.: 09/915,114) Examiner: Kieu Oanh T. Bui
Filed: July 25, 2001) Confirmation No.: 5783
For: METHOD AND APPARATUS FOR) Date: May 17, 2007
TRANSMISSION OF INTERACTIVE)
AND ENHANCED TELEVISION DATA)

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Signature: 

Name: Linda Clinkenbeard

AMENDMENT UNDER 37 C.F.R. § 1.111

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The following Amendments and Remarks are made in response to the Office Action mailed on February 20, 2007. Reexamination and reconsideration of the application in light of the following Amendments and Remarks are respectfully requested.

Amendments to the Claims begins on page 2 of this paper.

Remarks begin on page 9 of this paper.

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